

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		12	2/2
FORMALITY REVIEW	MB	954	4/6/01
RESPONSE FORMALITY REVIEW	TZ	JC 947	05/18/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1		3	
2		4	
3		5	
4		6	
5		7	
6		8	
7		9	
8		10	
9		11	
10		12	
11		13	
12		14	
13		15	
14		16	
15		17	
16		18	
17		19	
18		20	
19		21	
20		22	
21		23	
22		24	
23		25	
24		26	
25		27	
26		28	
27		29	
28		30	
29		31	
30		32	
31		33	
32		34	
33		35	
34		36	
35		37	
36		38	
37		39	
38		40	
39		41	
40		42	
41		43	
42		44	
43		45	
44		46	
45		47	
46		48	
47		49	
48		50	

Claim	Final	Original	Date
51		52	
52		53	
53		54	
54		55	
55		56	
56		57	
57		58	
58		59	
59		60	
60		61	
61		62	
62		63	
63		64	
64		65	
65		66	
66		67	
67		68	
68		69	
69		70	
70		71	
71		72	
72		73	
73		74	
74		75	
75		76	
76		77	
77		78	
78		79	
79		80	
80		81	
81		82	
82		83	
83		84	
84		85	
85		86	
86		87	
87		88	
88		89	
89		90	
90		91	
91		92	
92		93	
93		94	
94		95	
95		96	
96		97	
97		98	
98		99	
99		100	

Claim	Final	Original	Date
101			
102			
103			
104			
105			
106			
107			
108			
109			
110			
111			
112			
113			
114			
115			
116			
117			
118			
119			
120			
121			
122			
123			
124			
125			
126			
127			
128			
129			
130			
131			
132			
133			
134			
135			
136			
137			
138			
139			
140			
141			
142			
143			
144			
145			
146			
147			
148			
149			
150			

If more than 150 claims or 10 actions
 staple additional sheet here

Best Available Copy